Virginia Cooperative Extension
Virginia Tech • Virginia State University

New Adult Volunteer Enrollment in 4-H Online

Authored by State 4-H Online 2.0 Training Team

Prior to the 4-H Online enrollment process, all prospective volunteers must contact the 4-H Agent /staff at their <u>Local Cooperative Extension Office</u> to receive information about the program and enrollment process.

Family Profile

4-H Online profiles are family-based, which means every family creates a "master" profile with its own login email and password. A family profile may contain both youth and adults. A member file is then created within the family profile for each family member involved in Virginia 4-H. Once a family profile is created, it will exist for as long as members of that profile are involved in the 4-H program. New members may be added to the family profile at any time, and members who are no longer involved in 4-H may be archived.
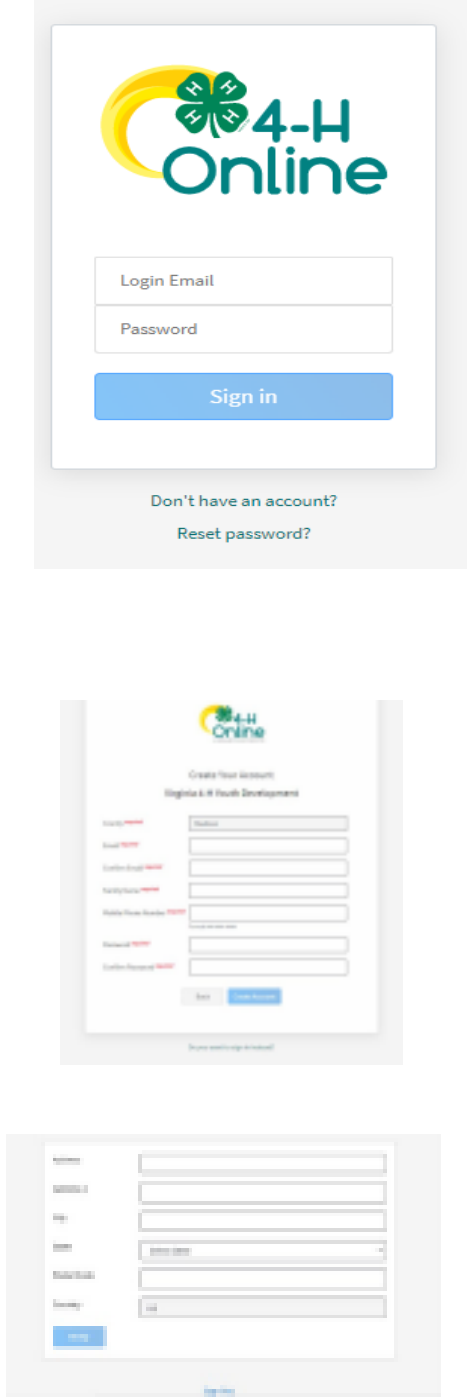
PLEASE DO NOT CREATE ANOTHER ACCOUNT. If someone in your family was involved in Virginia 4-H after 2015 you likely already have a family profile in 4-H Online. Use your existing login email and password to access your family profile in the 4-H Online platform. If you need assistance accessing your existing family profile, review the steps in this guide. If necessary, contact your ***Local Cooperative Extension Office*** for assistance.

Before beginning enrollment, please read the following notes:

1. This 4-H Online Enrollment system is for Youth Members and Adult Volunteers within the 4-H program. Parent contact information is linked in youth member records.

2. Please allow up to 30 minutes for the enrollment process.

3. *All NEW <u>Camp, Club, Project, and Coach</u> Volunteers (Level 2 & 3) will need to select "Program Volunteer" and the role of "New Volunteer" (Level 4) to go through the proper screening requirements. Activity and Episodic Volunteers (Level 1) are exempt from this requirement. Please contact your **Local Cooperative Extension Office** if you are not sure which volunteer type or role to select.*

4. ***Sterling Volunteers*** provides background screenings for VCE and VA Tech. Background Screenings are required for all volunteers *except* Activity or One Time/Occasional Volunteers.

5. Review the **4-H Online 2.0 Volunteer Levels and Types Tip Sheet** before creating your individual adult volunteer profile. You must select the proper Volunteer Type and Role within the system to be directed to the proper screening sections. You may select more than one volunteer role within the system. Please make sure you have selected all of your volunteer role(s) before proceeding to the next enrollment step.

6. Throughout the enrollment process, you will see an "Invoice" box located on the right side of your screen. Please disregard this feature as it does not apply to the task of enrolling 4-H members and volunteers..

7. As you use the 4-H Online system, you may have a need to navigate "back" to a previous page. Do NOT use your browser's back button as this will cause you to lose the information you just entered. USE THE BACK BUTTON at the BOTTOM of the system page.

8. Within each enrollment section are *"required"* questions. If these questions are not answered you will not be able to continue to the next section.

Enrolling an Adult Volunteer

Instruction	Image
A. Login: Need a new Family Account 1. Go to 4-H Online 2.0: https://v2.4honline.com 2. Select "Don't Have an Account" 3. Select "Create Your Account" 4. Select "Virginia" then "Virginia 4-H Youth Development" 5. Select Your "County" 6. Complete your family's information on the screen and click **"Create Account."** 7. Enter your address information and click the **"Verify"** button. The verification process may require you to select an appropriate USPS format	

B. Login: Have a Family Account

1. Log in to 4-H Online 2.0 at https://v2.4honline.com
   a. Using your original 4-H Online email address and password, login to your account.
   b. *If you do not remember your family email address, please contact your local Virginia Cooperative Extension office for assistance. If you do not remember your family password, click "Reset your password."
2. You may be required to reset your password. Passwords should be at least ten characters and include a capital letter, a numeral, and a special character. Once logged in, you will see a blank screen.
3. Once logged in, you will see a blank screen.
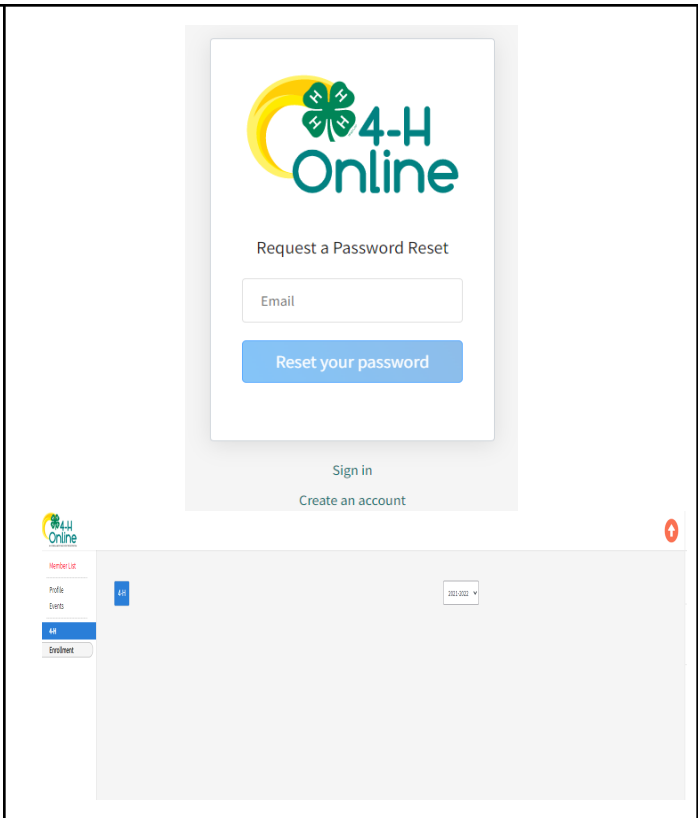
C. Pause Enrollment

1. If you have to pause your enrollment for any reason, close the website.
2. When you return later, login and go back to the Member List screen. It will show the status **"Adult- Incomplete."** Click **Continue Volunteer Application"** to continue at the last saved screen
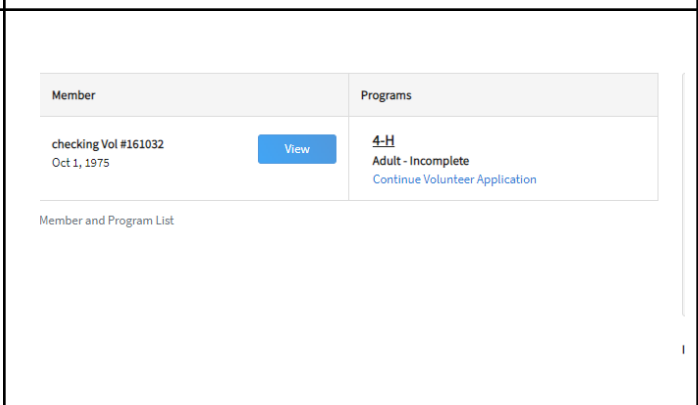
D. Add Member

1. Click **"Member List"** from the left side menu on your screen.
2. Select **" + Add Member"** on the upper right side of the screen.

3. Select **4-H** and click **"Next"** to continue
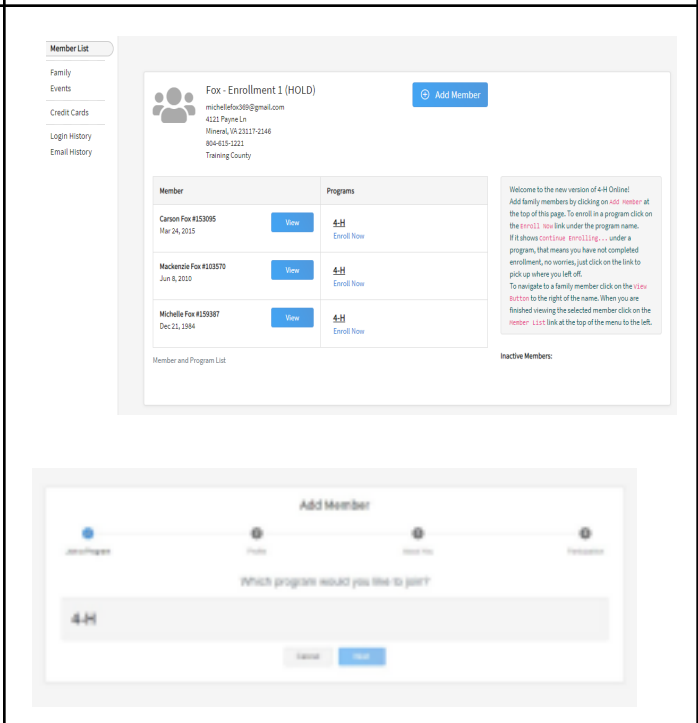
|	
4. Enter Member Profile information: Name, Birthdate, Email, Mobile Phone. Your birthdate will automatically add you to the adult volunteer role. Click **"Next"** to continue.	**Add Member** Join a Program — Profile — About You — Select Participation First Name *required* Middle Name Last Name *required* Preferred Name Birth Date *required* — Ex. 1/1/2001 Email Mobile Phone — Format ###-###-#### Number Of Previous Adult Years In Program Next
5. Next add Demographics and Emergency Contact information. Click **"Next"** to continue. .	**About You** Gender *required* **Demographics** Residence *required* Are you of Hispanic or Latino ethnicity? *required* Race *required* ☐ American Indian or Alaskan Native ☐ Asian ☐ Black or African American ☐ Native Hawaiian or Pacific Islander ☐ Other (race not listed) ☐ White ☐ Prefer Not To State **Emergency Contact** Full Name *required* Relationship to member *required* Contact Phone *required* Contact Email Back Next
E Participation 1. Click **"I want to join as a New or Returning 4-H Adult."** 2. Click "**Finish"** to continue.	**Add Member** Join a Program — Profile — About You — Select Participation How would you like to participate? I want to join 4-H as a New or Returning 4-H Adult I want to participate in 4-H but NOT as a 4-H Adult at this time. Back Finish

F. Volunteer Type

1. The member name and the enrollment year will be at the top of the screen.

2. Please make sure you have reviewed the updated **4-H Online 2.0 Volunteer Levels and Types Tip Sheet** before selecting the Volunteer Type/Role in which you will be participating. Brief descriptions are listed below.

3. ***All New Volunteers, except** for Activity-One Time/Occasional, *enrolling in the 4-H Online platform **MUST** select Program Volunteer -New Volunteer to be properly screened for the first time*.

4. In addition to Program Volunteer-New Volunteer, add the intended volunteer type and role, so that Club or Project is related to member profile.

5. Click **"Select Volunteer Types."**

6. A drop-down box with the **Volunteer Types** will appear**.** Once the Type is selected the associated Volunteer Roles will pre-populate in the order listed below. Select the role and click "Add" to continue.

    a. **Project** (Level 2)**:** *Role-4-H Board Members*

    b. **Club** (Level 2)**:** *Role-4-H Club Leaders, Club Volunteers, Master Volunteers*.

    c. **Camp** (Level 3)**:** *Role-Overnight Camp Volunteers, Overnight Travel Volunteer, or Returning Volunteer from 2019 – 2021 that need rescreening.*
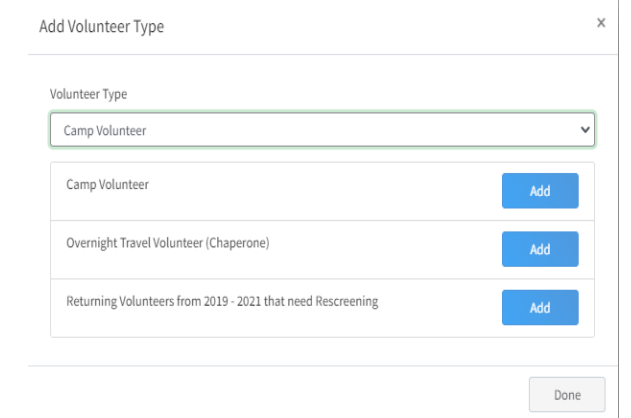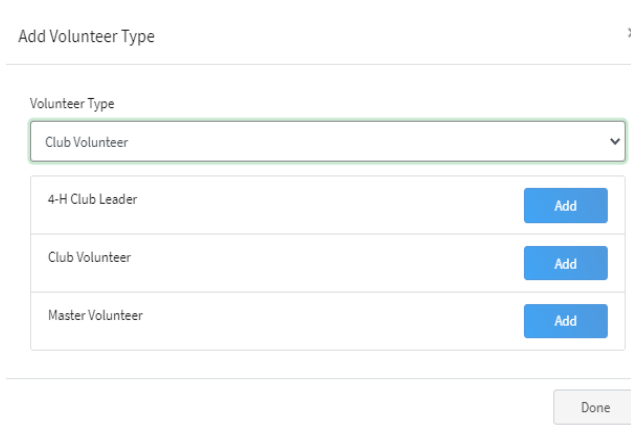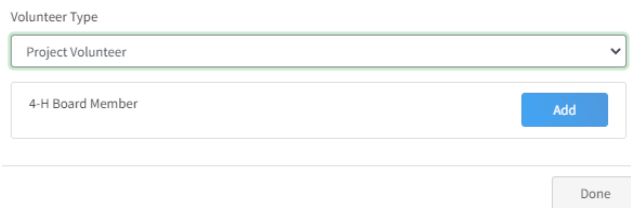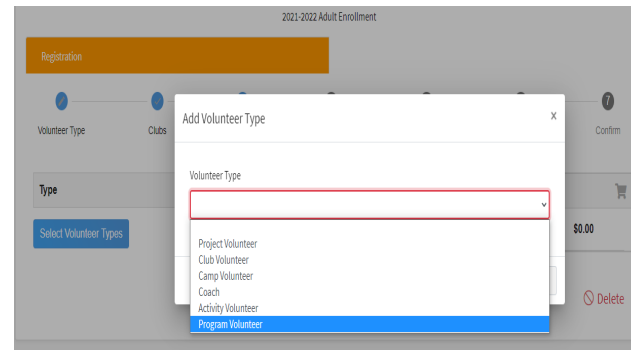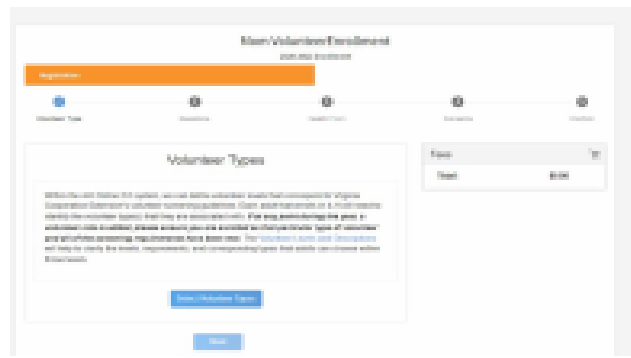
d. **Coach (Level 2):** *Role-Coach with Overnight Travel or Coach with Overnight Travel.*

Add Volunteer Type ×

Volunteer Type

| Coach ⌄ |

| Coach with NO Overnight Travel Responsibilities | Add |
| Coach with OVERNIGHT Travel Responsibilities | Add |

Done

e. **Activity** (Level 1)**:** *Role-Episodic Event & Episodic Activity or One Time/ Occasional Volunteer.*

**The One Time/Occasional Volunteer Consent will be the next screen. Please complete all fields

Add Volunteer Type ×

Volunteer Type

| Activity Volunteer ⌄ |

| Episodic Activity Volunteer | Add |
| Episodic Event Volunteer | Add |

Done

2021-2022 Adult Enrollment

| Registration | Screening |

Personal Information

First Name

Last Name

In what capacity of volunteer role will you be serving?

Volunteer Background Screening

Based upon the information contained in this application, and that contained in background and reference checks, potential volunteers may be subject to restrictions or prohibition of serving as a volunteer with Virginia Cooperative Extension / Virginia 4-H. Accepted volunteers will be required to adhere to Standards of Behavior, and all policies of Virginia Cooperative Extension and Virginia 4-H.

I understand that records and criminal background or reference checks may be conducted at any time during the application process or during volunteer service of VCE.

○ I have read the above statements and understand that records and criminal background or reference checks may be conducted on me at any time during the application process or during volunteer service of VCE.

Manager Name Certifying Paper Consent *required*

Save   Submit

f. **Program (Level 4):** Role-New Volunteer- New Club, Coach and Camp enrollments must select this type to be properly screened.

7. When all volunteer types and roles have been added, click "**Done.**"

Add Volunteer Type ×

Volunteer Type

| Program Volunteer ⌄ |

| New 4-H Program Volunteer | Add |

Done

8. If you select the wrong volunteer type and role, click the **"delete"** icon that is next to that type & role**.**

9. If you select the wrong Volunteer Type and Role, click the **"delete"** icon that is next to that type & role**.**If you select the wrong Volunteer Type and Role, click the **"delete"** icon that is next to that type & role**.**

10. Click **"Next"** to go to the next section.

Karen Deleted

2021-2022 Adult Enrollment

| Registration |

① Volunteer Type ② Clubs ③ Projects ④ Questions ⑤ Health Form ⑥ Consents ⑦ Confirm

Type	Role	
Camp Volunteer	Coach with OVERNIGHT Travel Responsibilities	🗑
Project Volunteer	Specialty Project Volunteer	🗑

| Invoice | 🛒 |
| Total: | $0.00 |

Select Volunteer Types

Next   ⊘ Delete

G. Clubs
(Skip this section if you are not a Club Volunteer)

1. Select the club the Volunteer will participate in by clicking, **"Select Units."** (*When 4-H Online lists the word "Unit" it refers to clubs.*)

2. On this next screen, a list of clubs for the State and the primary County will be listed. Select the club you wish to enroll in and click **"Add."**

3. If the Volunteer wishes to enroll in a club with a secondary county, contact the ***Local Cooperative Extension Office*** in both counties.

4. The next screen shows the club you have selected. If multiple clubs are selected, indicate which club will be the Volunteer's primary club by clicking "Change to Primary" beside the appropriate club, then click **"Next."**

5. **Although this does not show that this is a REQUIRED question it must be answered to complete enrollment.*

H. Projects

(Skip this section if you are not a Project Volunteer)

1. Please review the current list of available Projects and Descriptions.

2. If you are a Project Volunteer, click **"Select Projects."**

3. A drop-down box will show which project can be associated with the County or Club. Choose the project you are helping with and click **"Next"** to continue.

4. ***Although this does not show that this is a REQUIRED question it must be answered to complete enrollment if you are a Project Volunteer.*

Mama Training

2021-2022 Adult Enrollment

Registration

Volunteer Type	Clubs	Projects	Questions	Health Form	Consents	Confirm

Project Name	Years In Project	Parent Project	Club	Volunteer Type		Invoice	
						Total:	$0.00

Select Projects

Back   Next

⊘ Delete

Add Volunteer Projects   ✕

Club project volunteer or County wide project volunteer

◉ Club

○ County

Club

Test Club

Type To Search...

Agriculture	Select
Animal Science Education: Avian Bowl	Select
Animal Science Education: Dairy Judging	Select
Animal Science Education: Dairy Quiz Bowl	Select
Animal Science Education: Hippology	Select
Animal Science Education: Horse Bowl	Select
Animal Science Education: Horse Judging	Select
Animal Science Education: Livestock Judging	Select
Animal Science Education: Meat Judging	Select
Animal Science Education: Poultry Judging	Select

Add   Cancel

I. Questions

Please complete **ALL** of the following sections. They are part of the Volunteer Screening process.

Please make sure you have selected the appropriate Volunteer Type and Role to be directed to the correct questions. If multiple Volunteer Roles are selected, you will be screened at the highest level.

1. About You

2. Demographics

3. Emergency Contacts

4. Military Info

Mama Training
2021-2022 Adult Enrollment

Registration

○ Volunteer Type ○ Clubs ○ Projects ○ Questions ⑤ Health Form ⑥ Consents ⑦ Confirm

About You

Gender *required*

Job Title

Employer

Work Phone

Work Extension

Invoice 🛒
Total: $0.00

Demographics

Residence *required*

Are you of Hispanic or Latino ethnicity? *required*

Race *required*

☐ American Indian or Alaskan Native
☐ Asian
☐ Black or African American
☐ Native Hawaiian or Pacific Islander
☐ Other (race not listed)
☐ White
☐ Prefer Not to State

Emergency Contact

Full Name *required*

Papa

Relationship to member *required*

Husband

Contact Phone *required*

222-222-2222

Emergency Contact 2

Full Name

Relationship to member

Contact Phone

Contact Email

Military

Family Member Military Service *required*

Branch of Service *required*

Branch Component *required*

Other

5. External Screening:
Background Screenings are required for all NEW volunteers *except* Level 1-Activity Volunteers.This box specifically refers to outside organization background screenings and new volunteer enrollment. In the case of new enrollment the box is used in the manner below:

   a. **Do not check this box** You will be prompted to complete the Sterling screening process. **See step J. Volunteer Screening.**

   b. **Check this box:** If a criminal background screening was completed by another organization in 2021 and you have previously spoken to the 4-H Agent/staff at your ***Local Cooperative Extension Office*** about submitting that screening. It must be **pre-approved** by the 4-H State Events and Operation Coordinator prior to enrollment and you will not be prompted to complete the Sterling screening process.

6. Other- 4-H Info

7. Job Info/Previous Volunteer Roles

Screening

Select this option if you have already been screened as a volunteer for another organization or program and you would like that screening to be used for this enrollment. Please only submit qualified screenings. If a screening is not qualified, it will be sent back for completion of a qualified screening which may result in a delay of your approval.

☐ I would like to submit a previous screening.

Other

Do you wish to receive information from our 4-H Educational Centers and other Virginia Cooperative Extension Youth Programs? *required*

○ Yes
○ No

Are you a 4-H All-Star?

○ Yes
○ No

Are you 4-H Alumni?

○ Yes
○ No

Do you belong to the Virginia Association of Adult 4-H Volunteer Leaders?

○ Yes
○ No
○ Please send me more information

Employment/Volunteer Experience (Supervisor May be Contacted):
Please list your current and previous employment or volunteer experience.

What organization do you work/volunteer for?

What is your Supervisor's Name and Phone Number?

Is this a paid or volunteer role?

○ Paid Role
○ Volunteer Role

What is/was your role/duties?

What organization did you work/volunteer for?

8. References

Reference Full Name2:

Reference Phone Number2: (Day and Night)

Reference Email Address2:

Relationship2:

Reference Mailing Address2: (Please include address, city, state, zip)

Do you have a current and valid driver's license?

○ Yes
○ No

Do you have a current commercial driver's license (CDL)?

○ Yes
○ No

9. Drivers License/Insurance/Criminal Convictions: All misdemeanor and felony criminal and driving offenses must be listed. They will be screened for during the background screening process.

Do you currently have the minimum vehicle insurance coverage as required by the Commonwealth of Virginia?

○ Yes
○ No

Disclosure of Criminal Convictions

This information will be kept in a confidential manner and accessible only to authorized personnel. A "yes" answer does not automatically exclude you from volunteering for Virginia Cooperative Extension programs.

10. After answering questions **About You** the forms section is below.

Have you ever had any criminal convictions including moving traffic violations? *required*

11. It is mandatory for Level 3 Camp Volunteers to upload their COVID Vaccination card.

COVID Vaccination Card

No Image Selected

▣ Upload

4-H Event Medication Form

Download Template

PDF
No File Uploaded

▣ Upload

12. Click **"Next"** to continue the next section.

J. Health Information
Please complete **ALL** of the following sections. Some questions in red are "required."

    1.   Exposure, Restrictions and Vaccinations

    2.   Care and Remarks

Exposure

> Please list below any infectious disease that you might have been exposed to within the past year.

List Any Infectious Exposure
- ○ Yes
- ○ No

Restrictions

> Please list any Restrictions below that 4-H staff need to be made aware of?

List Any Restrictions
- ○ Yes
- ○ No

Vaccinations

Are the child, teen or adult, whom is applying for enrollment, immunizations up to date?
- ○ Yes
- ● No

Care

Family Physician Name

[   ]

Family Physician Phone

[   ]

Dentist Name

[   ]

Dentist Phone

[   ]

Remarks

> 4-H Programs include very rewarding, but sometimes challenging situations. Please inform us of any concerns that may arise related to your child's physical, mental, emotional, and/or social health in order that we may better provide appropriate supervision and support.

Is this participant experiencing any current health problems, under medical care, receiving mental or behavioral services, or currently taking medications?
- ○ Yes
- ○ No

	Do you have special instructions to assist in the the case of an emergency? ○ Yes ○ No Are there additional concerns that have not been addressed in any of the questions above? ○ Yes ○ No
3. History	**History** Acute Chronic Illness ○ Yes ○ No Have you had any restrictions that would prohibit you from participating in a prior activity? ○ Yes ○ No Have you had any recent infections? If yes, please list them below: ○ Yes ○ No
4. Health Insurance	**Health Insurance** Do you carry family medical/hospital insurance? *required* ○ Yes ◉ No Family Medical/Hospital Insurance Carrier [ ] Family Medical/Hospital Insurance Policy ID Number [ ]
5. Conditions	**Conditions** Has the participant ever experienced (or had special needs in) any of the following? Please check all that apply. Asthma ○ Yes ◉ No Bleeding/Clotting Disorder ○ Yes ◉ No Convulsions Or Seizures ○ Yes ◉ No Diabetes ○ Yes ◉ No Fainting ○ Yes ◉ No Heart Conditions ○ Yes ◉ No

6. Devices

Devices

Please list any devices, including glasses that you might be currently using.

Contact Lenses
○ Yes
● No

Dentures
○ Yes
● No

Epi-Pen
○ Yes
○ No

Glasses
○ Yes
● No

Hearing Aid
○ Yes
● No

Inhaler
○ Yes
○ No

7. Allergies

Allergies

The purpose of this section is to communicate any allergies including, but not limited to Life Threatening, Special dietary needs, food allergies, etc. for any child, teen, or adult who will be attending a 4-H event. In the questions below, please list all allergies AND any necessary precautions that should be taken.

List Any Allergies That Are Life Threatening : The purpose of this section is to communicate ANY allergies that are deemed life threatening for any child, teen, or adult who will be attending a 4-H event. In the space below, please list life threatening allergies for the individual who is enrolling in 4-H AND any necessary precautions that should be taken.
○ Yes
○ No

List Any Other Allergies
○ Yes
○ No

SPECIAL DIETARY NEEDS: Instructions: The purpose of this section is to communicate special dietary needs, food allergies, etc. for any child, teen, or adult who will be attending a 4-H event. In the space below, please list all food allergies and/or other dietary restrictions on the individual who is enrolling in 4-H AND any necessary precautions that should be taken.
○ Yes
○ No

8. Authorized Medications

Authorized Medications

Please make sure to complete the 4-H Event Medication form, for all 4-H Camping/Overnight Programs, for all medication(s) that will be taken as needed, including over-the-counter medications for headaches or cold, inhalers, etc. NOTE: The printed form must accompany your child to the 4-H event only if he/she is taking any medication.

List Any Over The Counter Medications
○ Yes
○ No

List Any Prescription Medications
○ Yes
○ No

Medication Instructions
○ Yes
○ No

9. Medical Release Adults will be asked to sign a required **"Medical Release"** in the event of an emergency. Click **"Next"** to continue.	**Adult Medical Release** I hereby give permission in the event of accident or injury for the medical staff or representative to secure proper treatment for, hospitalize, and to order injection and/or anesthesia and/or surgery for me. I understand that all attempts will be made to notify my emergency contacts of any such serious illness or injury. I hereby understand the nature and scope of the activities I am participating and agree to participate subject to limitations noted herein. This form may be photocopied for use outside of the event/activity location. (Note: If for any reason you cannot sign this, you must contact your *local Extension office* to obtain a legal waiver that must be signed.) ◉ I agree to the statements above. Manager Name Certifying Paper Consent *required* [ ] Back Next
K. Electronic Consents 1. Media Release	 **Media Release** **4-H PARTICIPANT MEDIA RELEASE** The Virginia Polytechnic Institute and State University/College of Agriculture and Life Sciences (CALS), Virginia State University/College of Agriculture, and/or Virginia Cooperative Extension periodically uses electronic and traditional media (e.g., photographs, video, audio footage, testimonials) for publicity and educational purposes. ○ By checking yes, I acknowledge reading this statement and give permission to the College of Agriculture and Life Sciences (Virginia Polytechnic Institute and State University, the College of Agriculture (Virginia State University), and Virginia Cooperative Extension, or its designee, to use such reproductions for educational and publicity purposes in perpetuity without further consideration from me. I understand that I will need to notify Virginia Polytechnic Instituted and State University/Coll ○ By checking no, I decline to give permission for any photograph, digital image, videotape, or other picture to be used for promotional purposes by Virginia Polytechnic Instituted, Virginia State University, and/or Virginia Cooperative Extension. Manager Name Certifying Paper Consent *required* [ ]
2. Privacy Statement	**Privacy Statement** **Privacy Statement** Virginia Cooperative Extension has created this privacy statement in order to demonstrate our firm commitment to privacy. The following discloses the information gathering and dissemination practices for this Web page:va.4honline.com and its subdomains. This site does not request any personal information or collect any information that personally identifies you or allows you to be personally contacted without your permission. Personal information that may be requested include your name, e-mail address, physical address, and telephone number. All forms on this site collect information exclusively for the stated purpose of the form. We do not share any personal information with any third parties nor do we use any personal information for purposes other than the reason stated when collected. ○ By marking this option, I indicate that I have read the VCE Privacy Statement Manager Name Certifying Paper Consent *required* [ ]

3. Standards of Behavior	**Standards of Behavior for Virginia 4-H Volunteers** Trustworthiness, respect, responsibility, fairness, caring, and citizenship are the six core ethical values which the CHARACTER COUNTS! program calls the "Six Pillars of Character." These values reflect those of the Virginia 4-H program and each 4-H member, volunteer, and staff member should strive to practice these values. The following standards for 4-H volunteers identify how these values will be reflected in volunteer performance. These standards help to ensure the safety and well-being of all 4-H participants and the integrity of the 4-H program. - I will teach, enforce, advocate, and model the Six Pillars of Character, which are trustworthiness, respect, responsibility, fairness, caring, and citizenship. - I will represent the Virginia 4-H program by conducting myself with courteous manners and language, exhibiting good sportsmanship, serving as a positive role model, and demonstrating reasonable conflict resolution skills. - I will dress in a manner that is appropriate for a given 4-H program/event in accordance with that program/event's dress code. - I will support and promote the Virginia 4-H mission, "To develop youth and adults working with those youth to realize their full potential – becoming effective, contributing citizens through participation in research-based, non-formal, hands-on educational experiences." - I will actively participate in, and complete, Virginia 4-H program orientation and training that prepares me to satisfactorily accomplish the tasks for which I have volunteered. - I will abide by all applicable laws and Virginia 4-H program policies, guidelines, and procedures. This includes, but is not limited to those regarding, child abuse, risk management, above suspicion, substance abuse, and limits of authority. - I will accept supervision and support from salaried 4-H Extension staff or designated management volunteers and understand that I work under the guidance, supervision, and leadership of the Extension staff in charge. - I will handle 4-H funds and engage in 4-H fundraising (when applicable) in an ethical manner. - I will make all reasonable efforts to ensure that programs are accessible to all individuals regardless of race, color, national origin, sex, religion, age, disability, political beliefs, sexual orientation, or marital or family status. An equal opportunity/affirmative action employer. - I will not use (or allow others to use) alcohol, marijuana, or illegal drugs at any 4-H program or event. I understand that tobacco products can only be used in approved areas at approved times during approved events if I am of legal age. I understand the Virginia 4-H Search and Seizure policy regarding alcohol, drugs, or weapons. - I will, when transporting youth, operate motor vehicles and other equipment in a safe and reliable manner and only with a valid operator's license in accordance with Virginia Tech and Virginia 4-H policies. I will comply with all motor vehicle-related state regulations and laws. All transported youth will be secured by properly operating seat belts when applicable. - I will conduct myself in a manner that is in the best interest of youth and the Virginia 4-H program and will not use the volunteer position for purposes of private or personal gain. - When applicable to my 4-H responsibilities, I will treat animals in a humane manner and teach program participants to provide appropriate animal care and management. - I will use technology in an appropriate manner in accordance with 4-H, Virginia Cooperative Extension, and Virginia Tech policies. - I will complete all necessary paperwork in a timely manner. ○ My signature indicates that I have read, understand, and agree to abide by these standards for volunteers. I understand that immediate suspension or termination of my position as a volunteer could result if I do not meet these standards. Manager Name Certifying Paper Consent *required*
4. Enrollment Agreements After reading and signing, click **"Next"** to continue. ***All Consents must be digitally signed by the adult enrolling within the 4-H program.***	**Volunteer Enrollment/Agreement** **Enrollment/Agreement** - I hereby certify that all of the entries on this application are true and complete. - I understand that any falsification of information herein constitutes cause for dismissal. - I am volunteering my time to further the educational purposes of Virginia Cooperative Extension. - I agree that, as a volunteer, I am required to adhere to the Standards of Behavior, and all policies of Virginia Cooperative Extension and Virginia 4-H. - I understand that based upon the information contained in this application, and that was obtained in background and reference checks *(if applicable)*, my volunteer status may be subject to restrictions or prohibition of serving as a volunteer with Virginia Cooperative Extension and Virginia 4-H. - Volunteers serve at the sole discretion of Virginia Cooperative Extension. ○ Virginia Cooperative Extension may at any time, for whatever reason, decide to terminate the volunteer's relationship with the organization or to make changes in the nature of their volunteer assignment. - I understand that Virginia Cooperative Extension programs and employment are open to all, regardless of age, color, disability, gender, gender identity, gender expression, national origin, political affiliation, race, religion, sexual orientation, genetic information, veteran status, or any other basis protected by the law. An equal opportunity/affirmative action employer. ○ I have read and understand the above statement. Manager Name Certifying Paper Consent *required* [Back] [Next]
L. Enrollment Review & Submission 1. Review page for accuracy and click **"Submit** to continue.	2021-2022 Adult Enrollment Registration Volunteer Type — Clubs — Projects — Questions — Health Form — Consents — Confirm **Karen's Enrollment** Birth Date: 4/18/1967, Age: 54 Role: Volunteer Invoice Total: $0.00 **Selected Units** Test Club, Training - Primary [Back] [Submit] ⊘ Delete

2. **If a Club or Project was not selected during the enrollment process and that is your volunteer type, an error message will appear and not let the submission continue. Use the **"Back"** button at the bottom of the screen to go back to the Club or Project screen and continue with the enrollment process.

3. This **Confirm Submission** screen asks to verify that you would like to continue with your volunteer enrollment. Click **"Confirm"** to continue.

4. After enrollment has been submitted a review of the record will be conducted by your ***Local Cooperative Extension Office*** and volunteers will be contacted via email from the 4-H Agent/staff with further information.

M. Volunteer Screening

1. After confirming enrollment, the next screen that appears refers to the **"Screening"** process. Click on the **Go to Sterling Volunteer** menu button.

2. This takes you to ***Sterling Volunteers*** where you must create an account before the order for the background screening can be placed.

3. Complete all required information and submit.

4. The ***Local Cooperative Extension Office*** must give ***Sterling Volunteer*** permission to proceed and will do so after review and prior screening of your 4-H Online record.

5. Volunteers will receive a confirmation email after the screening is ordered and completed from: TheAdvocates@sterlingvolunteers.com. The volunteer will get a link to review the detailed results.	
N. Enrollment Status 1. Status of the enrollment can be confirmed on the **Member List** screen beside the volunteer's name **"Awaiting Review"; "Volunteer Application Submitted" & "Screening Submitted"** 2. The 4-H Agent/staff will contact the volunteer regarding mandatory training in order to approve the enrollment. 3. If enrollment is incorrect or incomplete, your enrollment will be sent back with a note for changes or corrections via an email from 4-H Online and the 4-H Agent/staff. 4. Once enrollment is correct and any necessary training is complete it will be approved and the member status will change to **"Approved" & Enrolled for the 21-2022"** program year. 5. The 4-H Agent/staff and 4-H Online will send an email once the enrollment has been approved and status of the enrollment on the Member List screen beside the volunteer's name will change to "Volunteer Approved."	forgot forgot@noemail.com , Unknown 888-555-2223 Training County **Member** — to forgot #161035, Oct 1, 1975 — View — **Programs** — 4-H — Adult - Awaiting Review — Volunteer Application Submitted — Screening Submitted Member and Program List Welcome to the new version of 4-H Online! Add family members by clicking on Add Member at the top of this page. To enroll in a program click on the Enroll Now link under the program name. If it shows Continue Enrolling... under a program, that means you have not completed enrollment, no worries, just click on the link to pick up where you left off. To navigate to a family member click on the View Button to the right of the name. When you are finished viewing the selected member click on the Member List link at the top of the menu to the left. Inactive Members: Hello Melissa: Welcome to the Virginia 4-H Youth Development Program in . Your membership request for enrollment as Adult has been accepted for the current 4-H year. We look forward to having you actively involved in our program! Virginia 4-H **Comment** This email was sent to melissacourtney1222@gmail.com by 4-H Online. RegistrationMax LLC - 4301 W. William Cannon Drive Austin, TX 78749